

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
CLIP E. CLASSIFIER		16	4-18-81
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- △ (Through summary) Cancelled
- ✕ Restricted
- Non-elected
- Information
- Appeal
- Objected

Date	Claim	Date	Claim	Date	Claim
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
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If more than 150 claims or 10 actions  
staple additional sheet here

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